

02-0-01

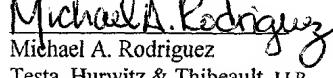
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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	AWR-048
	First Named Inventor	Gut et al.
	Title	Cache System and Method for Generating Uncached Objects from Cached and Stored Object Components

<u>APPLICATION ELEMENTS</u>		ADDRESS TO:
1. <input checked="" type="checkbox"/> Fee Transmittal Form 2. <input type="checkbox"/> Small Entity Status <input type="checkbox"/> Applicant claims small entity status <input type="checkbox"/> Status established in prior application and is still proper and desired 3. <input checked="" type="checkbox"/> Specification and Drawings [Total Pages 44] - Written Description - (28 pages) - Claims - (4 pages) - Abstract - (1 page) - Sheets of Drawings - (11 sheets) <input checked="" type="checkbox"/> Formal <input type="checkbox"/> Informal		Box Patent Application Assistant Commissioner for Patents Washington, D.C. 20231
<u>ACCOMPANYING APPLICATION PARTS</u>		
4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 3] a. <input checked="" type="checkbox"/> Newly executed (original) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> <i>[Note Box 4 below]</i>		8. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney 9. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
5. <input type="checkbox"/> Incorporation by Reference (usable if Box 3b is checked) The entire Disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 3b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.		11. <input type="checkbox"/> Preliminary Amendment <input type="checkbox"/> Drawings [Total Sheets] <input type="checkbox"/> Letter to Official Draftsperson Including Drawings [Total Pages]
6. <input checked="" type="checkbox"/> Application Data Sheet 7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Paper Copy (identical to computer copy) <input type="checkbox"/> CD (identical to computer copy) <input type="checkbox"/> Statement verifying identity of above copies		12. <input checked="" type="checkbox"/> Return Receipt Postcard 13. <input type="checkbox"/> Certified Copy of Priority Document(s) 14. <input type="checkbox"/> Deletion of Inventor(s) Signed statement attached deleting inventor(s) named in the prior application.
17. <input type="checkbox"/> If a CONTINUING APPLICATION, amend the specification by inserting on page 1, before the first line, the sentence: --This is a <input type="checkbox"/> continuation <input type="checkbox"/> divisional <input type="checkbox"/> continuation-in-part of prior application Serial No. / , filed on , the entire disclosure of which is incorporated by reference herein.--		15. <input type="checkbox"/> CD in duplicate for large table or computer program. 16. <input type="checkbox"/> Other:
Priority to the above application(s) is claimed under 35 U.S.C. 120. Prior application information: Examiner: . Group/Art Unit: .		
18. <input checked="" type="checkbox"/> Priority - 35 U.S.C. 119 <input checked="" type="checkbox"/> Priority of application Serial No. 60/225,412 filed on August 15, 2000 in <u>the United States</u> is claimed under 35 U.S.C. 119. <input type="checkbox"/> The certified copy has been filed in prior U.S. application Serial No. / on _____. <input type="checkbox"/> The certified copy will follow.		CORRESPONDENCE ADDRESS Direct all correspondence to: Kevin Russell Aware, Inc. 40 Middlesex Turnpike Bedford, MA 01730 Tel. No.: (781) 276-4000 Fax No.: (781) 276-4001
		SIGNATURE BLOCK Respectfully submitted,  Michael A. Rodriguez Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110

09/774986
01/31/01
FEE TRANSMITTAL
FY 2001

Complete if Known	
Application Serial Number	Not Yet Assigned
Filing Date	Herewith
First Named Inventor	Gut et al.
Group Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned
Attorney Docket No.	AWR-048 (457/51)

METHOD OF PAYMENT

1. Payment Enclosed:
 Check Money Order Other

2. The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531.
 Required Fees (copy of this sheet enclosed).
 Additional fee required under 37 CFR 1.16 and 1.17.
 Overpayment Credit.

3. Applicant claims small entity status.

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	
50	25	Surcharge - late provisional filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	For filing a request for reexamination	
110	55	Extension for reply within first month	
390	195	Extension for reply within second month	
890	445	Extension for reply within third month	
1,390	695	Extension for reply within fourth month	
1,890	945	Extension for reply within fifth month	
310	155	Notice of Appeal	
310	155	Filing a brief in support of an appeal	
270	135	Request for oral hearing	
130	130	Petitions to the Commissioner	
50	50	Petitions related to provisional applications	
180	180	Submission of Information Disclosure Statement	
710	355	Filing a submission after final rejection (37 CFR 1.129(a))	
710	355	For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (Specify)			
Other fee (Specify)			

FEE CALCULATION**1. FILING FEE****Large Entity**

Fee (\$)	Fee Description	Fee Paid
710	Utility filing fee	710
320	Design filing fee	
150	Provisional filing fee	

	Number Filed	Number Extra	Rate	Amount
Total Claims	37	- 20 = 17	x \$ 18.00 =	306.00

	Number Filed	Number Extra	Rate	Amount
Independent Claims	4	- 3 = 1	x \$ 80.00 =	80.00

	Number Filed	Number Extra	Rate	Amount
<input type="checkbox"/> Multiple Dependent Claim(s), if any			\$270.00 =	0.00
				TOTAL: 1096.00
				SMALL ENTITY DISCOUNT: 0.00
				SUBTOTAL (1) (\$ 1096.00)

2. AMENDMENT CLAIM FEES

Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid
Total	-	=	x \$ 18.00 =	
Indep.	-	=	x \$ 80.00 =	
<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$270.00 =	

	Number Filed	Number Extra	Rate	Amount
				TOTAL: (\$ 0)
				SMALL ENTITY DISCOUNT: (\$ 0)
				SUBTOTAL (2) (\$ 0)

SUBTOTAL (3) (\$ 0)

SUBTOTAL (1)	1096.00
SUBTOTAL (2)	0
SUBTOTAL (3)	0

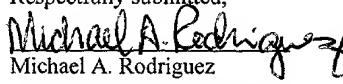
TOTAL (\$ 1096.00)

CORRESPONDENCE ADDRESS

Direct all correspondence to:

Kevin Russell
Aware, Inc.
40 Middlesex Turnpike
Bedford, MA 01730
Tel. No.: (781) 276-4000
Fax No.: (781) 276-4001

SIGNATURE BLOCK

Respectfully submitted,

Michael A. Rodriguez
Testa, Hurwitz & Thibeault, LLP
High Street Tower-125 High Street
Boston, MA 02110